| <b>B1</b> (Official For   | m 1)(4/1               | 0)                        |                     |  |                                    |   |  |   |                                |                    |  |                               |
|---|------------------------|---------------------------|---------------------|--|------------------------------------|---|--|---|--------------------------------|--------------------|--|-------------------------------|
|   |                        |                           | United S<br>Nort    |  | Bankı<br>District o                |   |  | ,   |                                |                    | Voluntary  | Petition                      |
| Name of Debto<br>Delaine, C   |                        |                           | er Last, First,     | Middle):   |                                    |   | Nam                                    | e of Joint De   | ebtor (Spouse                  | e) (Last, First,   | Middle):   |                               |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  |                        |                           |                     |  |                                    |   |  | Joint Debtor in<br>trade names):  | n the last 8 years             |                    |  |                               |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)  xxx-xx-6018                                      |                        |                           |                     | EIN Last   | four digits o<br>e than one, state | f Soc. Sec. of                          | r Individual-T                         | axpayer I.D. (ITIN) N   | o./Complete EIN                |                    |  |                               |
| Street Address of<br>1490 McEl<br>Cuba, AL  | of Debtor              |                           | Street, City, a     | nd State)  | :                                  | ZIP Co                                  |  | t Address of  | Joint Debtor                   | r (No. and Stre    | eet, City, and State):   | ZIP Code                      |
|   |                        |                           |                     |  | [3                                 | 36907                                   | ode                                    |   |                                |                    |  | Zii code                      |
| County of Resid   | dence or o             | of the Princ              | cipal Place of      | Business   | :                                  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Cour                                   | ty of Reside  | ence or of the                 | e Principal Plac   | ce of Business:  |                               |
| Mailing Addres P.O. Box 1 Cuba, AL  |                        | or (if diffe              | rent from stre      | et addres  | s):                                |   | Mail                                   | ng Address  | of Joint Deb                   | tor (if differen   | t from street address):  |                               |
| <b>l</b> '  |                        |                           |                     |  | _                                  | ZIP Co                                  | ode                                    |   |                                |                    |  | ZIP Code                      |
| Location of Prin  | nainal Ass             | ate of Due                | inass Dahtar        |  |                                    | <u> 86907</u>                           |  |   |                                |                    |  |                               |
| (if different from  |                        |                           |                     |  |                                    |   |  |   |                                |                    |  |                               |
|   | Type of 1              |                           |                     | Nature of Business   |                                    |   | Chapter                                | r of Bankrupt   | tcy Code Under Whi             | ch                 |  |                               |
| (F  | •                      | ganization)               |                     | (Check one box)  |                                    |   | 1_                                     |   | Petition is File               | ed (Check one box) |  |                               |
| (Check one box)  ■ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership                |                        |                           | form.               | <ul> <li>☐ Health Care Business</li> <li>☐ Single Asset Real Estate as dein 11 U.S.C. § 101 (51B)</li> <li>☐ Railroad</li> <li>☐ Stockbroker</li> <li>☐ Commodity Broker</li> <li>☐ Clearing Bank</li> </ul> |                                    |   |  | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt   | er 9<br>er 11<br>er 12         | of a<br>□ Ch       | apter 15 Petition for F<br>a Foreign Main Proce<br>apter 15 Petition for F<br>a Foreign Nonmain Pr | eding<br>Recognition          |
| Other (If deb   |                        |                           |                     | Other  |                                    |   |  |   |                                |                    | of Debts   |                               |
| check this box and state type of entity below.)   |                        |                           | ty below.)          | Tax-Exempt Entity (Check box, if applicable)  ☐ Debtor is a tax-exempt organiz under Title 26 of the United St Code (the Internal Revenue Co   |                                    |   | able)<br>organization<br>ited States   | defined<br>"incurr  | in 11 U.S.C.<br>ed by an indiv | onsumer debts,     | busir<br>for   | s are primarily<br>ess debts. |
|   | Fili                   | ng Fee (Cl                | heck one box        | )  |                                    | Che                                     | ck one box:                            | •   | Chap                           | pter 11 Debto      | rs   |                               |
| Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the          |                        |                           |                     | Debtor is no<br>ck if:<br>Debtor's ag  | t a small busi<br>gregate nonco    | ness debtor as<br>ntingent liquid       | lated debts (excl                      | .S.C. § 101(51D). uding debts owed to insi  |                                |                    |  |                               |
| Form 3A.  | oic to pay 1           | ес слесре п               | i motumiento. I     | tuic 1000(   | b). Bee Offic                      | _                                       |  | less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter). applicable boxes: |                                |                    |  |                               |
| ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. ☐ A |                        |                           |                     | A plan is be   | ing filed with<br>of the plan w    | •                                       |  | one or more classes of cr   | editors,                       |                    |  |                               |
| Statistical/Adm  Debtor estin   |                        |                           |                     | for distril  | oution to un                       | secured                                 | creditors                              |   |                                | THIS               | SPACE IS FOR COURT   | USE ONLY                      |
| ☐ Debtor estin  | nates that,            | , after any               |                     | erty is exc  | cluded and                         | administ                                |  | ses paid,   |                                |                    |  |                               |
| Estimated Num   | _                      |                           |                     | _  | п                                  |   |  | п —   | п —                            |                    |  |                               |
| 1- 5<br>49 9  | 50-<br>99              | 100-<br>199               | 200-                | 1,000-<br>5,000  | 5,001-<br>10,000                   | 10,001-<br>25,000                       | 25,001-<br>50,000                      | 50,001-<br>100,000  | OVER<br>100,000                |                    |  |                               |
| \$50,000 \$   | 550,001 to<br>6100,000 | \$100,001 to<br>\$500,000 | \$500,001<br>to \$1 | \$1,000,001<br>o \$10<br>nillion   | \$10,000,001<br>to \$50<br>million | \$50,000,0<br>to \$100<br>million       | 01 \$100,000,00<br>to \$500<br>million | \$500,000,001<br>to \$1 billion   |                                |                    |  |                               |
| \$0 to \$   | 650,001 to 6100,000    | \$100,001 to \$500,000    | \$500,001<br>to \$1 | \$1,000,001<br>to \$10<br>million  | \$10,000,001<br>to \$50<br>million | \$50,000,0<br>to \$100<br>million       | 01 \$100,000,00<br>to \$500<br>million | 1 \$500,000,001<br>to \$1 billion   | More than \$1 billion          |                    |  |                               |

B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): Voluntary Petition Delaine, Charles B (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: Northern District of Alabama Western Division 07-70788 5/09/07 Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Rod Cameron Shirley March 30, 2011 Signature of Attorney for Debtor(s) (Date) **Rod Cameron Shirley** Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in П this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(4/10)

## **Voluntary Petition**

(This page must be completed and filed in every case)

## Signatures

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Charles B Delaine

Signature of Debtor Charles B Delaine

 $\mathbf{X}$  .

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 30, 2011

Date

#### Signature of Attorney\*

## X /s/ Rod Cameron Shirley

Signature of Attorney for Debtor(s)

#### Rod Cameron Shirley ASB-8512-L52R

Printed Name of Attorney for Debtor(s)

#### **Camron Law**

Firm Name

2330 University Blvd Ste 314 Tuscaloosa, AL 35401

Address

## Email: RodCamronLaw@Bellsouth.net 205-349-2455 Fax: 205-349-0004

Telephone Number

## March 30, 2011

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

## Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Delaine, Charles B

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| _ | -  |   |  |
|---|----|---|--|
| N | ١. | , |  |

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

## United States Bankruptcy Court Northern District of Alabama

| In re | Charles B Delaine |           |         |    |
|-------|-------------------|-----------|---------|----|
|       |                   | Debtor(s) | Chapter | 13 |

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or                 |
|--|
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to         |
| financial responsibilities.);  |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being              |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, o |
| through the Internet.);  |
| ☐ Active military duty in a military combat zone.  |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling       |
| requirement of 11 U.S.C. § 109(h) does not apply in this district.   |

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Charles B Delaine

Charles B Delaine

Date: March 30, 2011

# **United States Bankruptcy Court**Northern District of Alabama

| In re | Charles B Delaine |        | Case No. |    |
|-------|-------------------|--------|----------|----|
|       |                   | Debtor | ,        |    |
|       |                   |        | Chapter  | 13 |

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 2                | 194,200.00        |             |          |
| B - Personal Property   | Yes                  | 3                | 3,200.00          |             |          |
| C - Property Claimed as Exempt  | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 67,263.00   |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 8                |                   | 16,012.00   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 1                |                   |             | 1,410.00 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 1                |                   |             | 843.04   |
| Total Number of Sheets of ALL Schedu  | ıles                 | 20               |                   |             |          |
|   | To                   | otal Assets      | 197,400.00        |             |          |
|   |                      |                  | Total Liabilities | 83,275.00   |          |

## United States Bankruptcy Court Northern District of Alabama

| In re | Charles B Delaine                  |             | Case No.        |                      |
|-------|------------------------------------|-------------|-----------------|----------------------|
|       | D                                  | ebtor       | ,<br>Chapter    | 13                   |
|       |                                    |             | - T             | -                    |
|       | STATISTICAL SUMMARY OF CERTAIN LIA | ABILITIES A | AND RELATED DAT | 'A (28 U.S.C. § 159) |

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

## State the following:

| Average Income (from Schedule I, Line 16)  | 1,410.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 843.04   |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 653.00   |

#### State the following:

| State the lone wing.   |      |           |
|--|------|-----------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 0.00      |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 16,012.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 16,012.00 |

| In re  | Charles B Delai   |  | Debtor   |   | Case No.   |   |
|--|---|--|--|---|--|---|
|  |   |  | Deotor   |   |  |   |
|  |   | SCHE   | DULE A - REAL PI   | ROPERTY   |  |   |
| cotenant, con the debtor's o "J," or "C" in "Description  Do not Unexpired L  If an esclaims to hole | nmunity property, of the column labeled and Location of Property include interests the column to have a secured interest as secured interest and a secured interest interest and a secured interest interest and a secured interest | or in which the debtor has a<br>debtor is married, state whe<br>d "Husband, Wife, Joint, or<br>operty."<br>in executory contracts an<br>e a lien or hold a secured in<br>t in the property, write "Nor | ich the debtor has any legal, ed<br>a life estate. Include any prope<br>ther husband, wife, both, or the<br>Community." If the debtor had<br>ad unexpired leases on this so<br>atterest in any property, state the<br>ne" in the column labeled "Am<br>an claimed in the property only | rty in which the de marital commulds no interest in chedule. List the amount of the shount of Secured | debtor holds rights and pownity own the property by plareal property, write "None"  em in Schedule G - Execute secured claim. See Schedule Claim." | ers exercisable for acing an "H," "W," under ory Contracts and D. If no entity adividual or |
|  | Description and L   | ocation of Property  | Nature of Debtor's<br>Interest in Property   | Husband,<br>Wife,<br>Joint, or<br>Community   | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption                                       | Amount of<br>Secured Claim  |
| House & Lo<br>1490 McElro<br>Cuba, AL 30   |   |  | Fee simple   | -   | 60,800.00  | 20,000.00   |
| Liquidation<br>Property Va<br>Mortgage:<br>Judgement   | llue: \$60800<br>\$8000<br>Lient: \$12000<br>\$40800  |  |  |   |  |   |
| Trustee Fee  | \$35328<br>e: \$6830  | _  |  |   |  |   |
| Exemption:   | \$28498<br>\$5000   | _  |  |   |  |   |
| Available to<br>\$26533  | unsecured cree  | ditors: \$23498 + 5% =   |  |   |  |   |
| 6 Acres loc<br>Sumter Coւ  | ated at<br>inty, Alabama  |  | Heir Property  | -   | 6,600.00   | 0.00  |
| _iquidation  | Analysis:   |  |  |   |  |   |
| Property Va<br>Cost of Sale  |   |  |  |   |  |   |
| Trustee Fee  | \$6006<br>e: \$1410   |  |  |   |  |   |
| Available to<br>\$5194   | unsecured cred  | ditors: \$4596 + 5% =  |  |   |  |   |

Sub-Total >

67,400.00

(Total of this page)

<sup>1</sup> continuation sheets attached to the Schedule of Real Property

| _     |                   | ~       |
|-------|-------------------|---------|
| In re | Charles B Delaine | Case No |

Debtor

## **SCHEDULE A - REAL PROPERTY**

(Continuation Sheet)

| Desc   | cription and Locat | ion of Property   | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |
|--|--------------------|-------------------|--|--|--|----------------------------|
| 1 Acre located<br>Sumter County                                      |                    |                   | Heir Property                              | -  | 4,000.00   | 0.00                       |
| Liquidation Ana<br>Property Value<br>Cost of Sale:                   |                    |                   |  |  |  |                            |
| Trustee Fee:   | \$3640<br>\$1000   |                   |  |  |  |                            |
| Available to un<br>\$2983  | secured credito    | rs: \$2640 + 5% = |  |  |  |                            |
| House & Lot located at<br>2073 Edinburgh Dr.<br>Montgomery, AL 36116 |                    | Fee simple        | -  | 122,800.00                                 | 47,263.00  |                            |
| Debtor's interes<br>Direct pay by th                                 |                    |                   |  |  |  |                            |
| Liquidation Ana<br>Property Value<br>Mortgage:                       |                    |                   |  |  |  |                            |
| 1/2 Interest:  | \$75537<br>/2      |                   |  |  |  |                            |
| Cost of Sale:  | \$37769<br>\$11052 |                   |  |  |  |                            |
| Trustee Fee:   | \$26717<br>\$9390  |                   |  |  |  |                            |
| Available to un  | secured credito    | rs: \$9390 + 5% = |  |  |  |                            |

Sub-Total > **126,800.00** (Total of this page)

Total > 194,200.00

(Report also on Summary of Schedules)

| In re | Charles B Delaine | Case No |
|-------|-------------------|---------|
| -     |                   | Debtor  |

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 1.  | Cash on hand  | Cash             |                                      | -   | 25.00   |
| 2.  | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | X                |                                      |   |   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |                                      |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | Househ           | old Goods                            | -   | 1,500.00  |
| 5.  | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | X                |                                      |   |   |
| 6.  | Wearing apparel.  | Clothin          | g                                    | -   | 150.00  |
| 7.  | Furs and jewelry.   | Jewelry          | •                                    | -   | 50.00   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | 1 Shoto          | jun                                  | -   | 50.00   |
| 9.  | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.   | X                |                                      |   |   |
| 10. | Annuities. Itemize and name each issuer.  | X                |                                      |   |   |
|     |   |                  |                                      |   |   |

Sub-Total > 1,775.00 (Total of this page)

**<sup>2</sup>** continuation sheets attached to the Schedule of Personal Property

| -    |         |         |    |
|------|---------|---------|----|
| n re | Charles | B Delai | ne |

Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|--|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х                |                                      |   |  |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |   |  |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |  |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |                                      |   |  |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |  |
| 16. | Accounts receivable.  | X                |                                      |   |  |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |  |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                      |   |  |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | x                |                                      |   |  |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |  |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |  |
|     |   |                  |                                      | Sub-Tota                                    | al > <b>0.00</b>   |
|     |   |                  | (To                                  | otal of this page)                          |  |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

| _     | _       |           |
|-------|---------|-----------|
| In re | Charles | B Delaine |
|       |         |           |

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property   | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | Х                |  |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |  |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x                |  |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | 19               | 998 Hyundai Elantra                    | -   | 800.00  |
|     | other vehicles and accessories.   | 19               | 992 GMC Pick-UP                        | -   | 525.00  |
|     |   |                  | 991 Oldsmobile Silouette<br>ot Running | -   | 100.00  |
| 26. | Boats, motors, and accessories.   | X                |  |   |   |
| 27. | Aircraft and accessories.   | X                |  |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |  |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |  |   |   |
| 30. | Inventory.  | X                |  |   |   |
| 31. | Animals.  | X                |  |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |  |   |   |
| 33. | Farming equipment and implements.   | X                |  |   |   |
| 34. | Farm supplies, chemicals, and feed.   | X                |  |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |  |   |   |

Sub-Total > 1,425.00 (Total of this page)

Total > **3,200.00** 

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

| •  |    |
|----|----|
| In | re |

**Charles B Delaine** 

Debtor

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3) | to which debtor is entitled u | der: Check if debtor claims a homestead exemption that exceeds \$146,450. (Amount subject to adjustment on 4/1/13, and every three years the with respect to cases commenced on or after the date of adjustment of the date of the date of adjustment of the date of the da |                                  |   |  |
|--|-------------------------------|---|----------------------------------|---|--|
| Description of P   | roperty                       | Specify Law Providing<br>Each Exemption   | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |  |
| Real Property<br>House & Lot located at<br>1490 McElroy Rd.<br>Cuba, AL 36907                |                               | Ala. Code §§ 6-10-2, 6-10-3, 6-10-4;<br>Const. Art. X, § 205  | 5,000.00                         | 60,800.00   |  |
| Liquidation Analysis: Property Value: \$60800 Mortgage: \$8000 Judgement Lient: \$12000      |                               |   |                                  |   |  |
| \$40800<br>Cost of Sale: \$5472  | _                             |   |                                  |   |  |
| \$35328<br>Trustee Fee: \$6830   | _                             |   |                                  |   |  |
| \$28498<br>Exemption: \$5000   | =                             |   |                                  |   |  |
| Available to unsecured cree \$26533  | ditors: \$23498 + 5% =        |   |                                  |   |  |
| <u>Cash on Hand</u><br>Cash  |                               | Ala. Code § 6-10-6, 6-10-126  | 25.00                            | 25.00   |  |
| Household Goods and Furr<br>Household Goods  | <u>nishings</u>               | Ala. Code § 6-10-6, 6-10-126  | 1,500.00                         | 1,500.00  |  |
| Wearing Apparel<br>Clothing  |                               | Ala. Code §§ 6-10-6, 6-10-126   | 150.00                           | 150.00  |  |
| <u>Furs and Jewelry</u><br>Jewelry   |                               | Ala. Code §§ 6-10-6, 6-10-126   | 50.00                            | 50.00   |  |
| Firearms and Sports, Photo<br>1 Shotgun  | graphic and Other Hob         | <u>by Equipment</u><br>Ala. Code § 6-10-6, 6-10-126   | 50.00                            | 50.00   |  |
| Automobiles, Trucks, Traile<br>1998 Hyundai Elantra  | rs, and Other Vehicles        | Ala. Code § 6-10-6, 6-10-126  | 800.00                           | 800.00  |  |
| 1992 GMC Pick-UP   |                               | Ala. Code § 6-10-6, 6-10-126  | 525.00                           | 525.00  |  |
| 1991 Oldsmobile Silouette<br>Not Running   |                               | Ala. Code § 6-10-6, 6-10-126  | 100.00                           | 100.00  |  |

Total: **8,200.00 64,000.00** 

| In re | Charles | B Delaine |
|-------|---------|-----------|

Debtor

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CDEDITOR'S NAME  |          | Husband, Wife, Joint, or Community |   |                  |                  | D      | AMOUNT OF   |                                 |
|--|----------|------------------------------------|---|------------------|------------------|--------|---|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>A<br>M                        | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND VALUE<br>OF PROPERTY<br>SUBJECT TO LIEN                        | I<br>N<br>G<br>E | DZLLQULDA        | SPUTED | CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No. 6018   |          |                                    | 2005  | Т                | A<br>T<br>E<br>D |        |   |                                 |
| Bank of York<br>P.O. Box 96<br>York, AL 36925  |          | -                                  | Mortgage House & Lot located at 1490 McElroy Rd. Cuba, AL 36907 Arrears included in plan: \$0 Direct payments resume: April, 2011 |                  | ט                |        |   |                                 |
|  | L        |                                    | Value \$ 60,800.00  | Ш                |                  | _      | 8,000.00  | 0.00                            |
| Account No. xxxx001  |          |                                    | 2005  |                  |                  |        |   |                                 |
| Investment Retriever<br>4511 Golden Foothills<br>El Dorado Hills, CA 95762                           |          | -                                  | Judgement Lien  House & Lot located at 1490 McElroy Rd. Cuba, AL 36907  |                  |                  |        |   |                                 |
|  |          |                                    | Value \$ 60,800.00  | 1                |                  |        | 12,000.00   | 0.00                            |
| Account No. xxx7001  Regions Bank P.O. Box 4409 Bridgeton, MO 63044                                  | х        | -                                  | 1999 Bare Legal Title - co-signer only House & Lot located at 2073 Edinburgh Dr. Montgomery, AL 36116 Direct pay by third party   |                  |                  |        |   |                                 |
|  |          |                                    | Value \$ 122,800.00   |                  |                  |        | 47,263.00   | 0.00                            |
| Account No.  |          |                                    | Value \$  |                  |                  |        |   |                                 |
| continuation sheets attached   |          |                                    | S<br>(Total of tl   | - 1              | 67,263.00        | 0.00   |   |                                 |
| Total (Report on Summary of Schedules)   |          |                                    |   |                  |                  |        | 67,263.00   | 0.00                            |

In re

Charles B Delaine

| Case No. |  |
|----------|--|
|          |  |

Debtor

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| total also on the Statistical Summary of Certain Liabilities and Related Data.   |
|--|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |
| ☐ Domestic support obligations   |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).  |
| ☐ Extensions of credit in an involuntary case  |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
| ☐ Wages, salaries, and commissions   |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans  |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
| ☐ Certain farmers and fishermen  |
| Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ Deposits by individuals  |
| Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).   |
| ☐ Taxes and certain other debts owed to governmental units   |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |
| ☐ Commitments to maintain the capital of an insured depository institution   |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   |
| ☐ Claims for death or personal injury while debtor was intoxicated   |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).   |

0 continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Charles B Delaine | Case No |  |
|-------|-------------------|---------|--|
| -     |                   | Debtor  |  |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F

|   |                 |     | no to report on and senedare 11                                 |               |             |   |                 |
|---|-----------------|-----|---|---------------|-------------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C H | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE | CONTINGEN     | UNLIQUIDAT  | S | AMOUNT OF CLAIM |
| Account No. xxx7001   |                 |     | 2005  | T             | T<br>E<br>D |   |                 |
| 1st MS Federal Credit Union<br>POB 5774<br>Meridian, MS 39301                                     |                 | _   | Account   |               | D           |   | 734.00          |
| Account No. xxxb001   |                 |     | 1992  |               |             |   |                 |
| American Express<br>P.O. Box 7871<br>Fort Lauderdale, FL 33329                                    |                 | -   | Credit Card Purchases   |               |             |   | 207.00          |
| Account No. xxxb001  American Express P.O. Box 7871   |                 | _   | 1992<br>Credit Card Purchases                                   |               |             |   |                 |
| Fort Lauderdale, FL 33329   |                 |     |   |               |             |   |                 |
|   |                 |     |   |               |             |   | 1,317.00        |
| Account No. xxxa008  AT & T P.O. Box 105068 Atlanta, GA 30348                                     |                 | _   | 2006<br>Services  |               |             |   |                 |
|   |                 |     |   |               | L           |   | 61.00           |
| _7 continuation sheets attached   |                 |     | (Total of t   | Subt<br>his j |             |   | 2,319.00        |

| In re | Charles B Delaine | Case No  |
|-------|-------------------|----------|
| -     |                   | Debtor , |

| CREDITOR'S NAME,   | ç        | Ηu          | sband, Wife, Joint, or Community  | ç          | Ü                | D       |                 |
|--|----------|-------------|---|------------|------------------|---------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>J<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | U<br>I<br>D      | ISPUTED | AMOUNT OF CLAIM |
| Account No.  |          |             |   | ]⊤         | A<br>T<br>E<br>D |         |                 |
| AFNI<br>P.O. Box 3427<br>Bloomington, IL 61702                                   |          |             | Representing:<br>AT & T   |            | D                |         | Notice Only     |
| Account No.  | T        | T           |   | T          | T                | T       |                 |
| Cavalry Portfolio Services<br>7 Skyline Dr<br>Hawthorne, NY 10532                |          |             | Representing: AT & T  |            |                  |         | Notice Only     |
| Account No. 6018   |          |             | 2006  |            |                  |         |                 |
| B-Real<br>c/o NCO<br>2101 4th Ave Ste 1030<br>Seattle, WA 98121-2317             |          | -           | Account   |            |                  |         | 300.00          |
| Account No. 6018   |          |             | 2006  | T          |                  |         |                 |
| Bank One<br>P.O. Box 94014<br>Palatine, IL 60094-4014                            |          | -           | Account   |            |                  |         | 1,200.00        |
| Account No.  | T        |             |   | $\vdash$   | $\vdash$         |         |                 |
| Roundup Funding<br>POB 91121<br>Seattle, WA 98111-9221                           |          |             | Representing:<br>Bank One   |            |                  |         | Notice Only     |
| Sheet no1 of _7 sheets attached to Schedule of                                   |          |             |   | Subi       |                  |         | 1,500.00        |
| Creditors Holding Unsecured Nonpriority Claims                                   |          |             | (Total of t   | nis        | pag              | ge)     |                 |

| In re | Charles B Delaine | Case No. |
|-------|-------------------|----------|
| •     |                   | Debtor   |

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)            | CODEBTOR | C<br>A<br>H | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDAT | DISPUTED | AMOUNT OF CLAIM |
|--|----------|-------------|---|------------|------------|----------|-----------------|
| Account No. xx-x7-163  Capital One 15000 Capital One Dr. Richmond, VA 23238                                  |          | _           | 2007<br>LAWSUIT   |            | ED         |          | 646.00          |
| Account No. xxxv001  Capital One 15000 Capital One Dr. Richmond, VA 23238                                    |          | -           | 2000<br>Credit Card Purchases                                     |            |            |          | 217.00          |
| Account No. xxx9002  CBUSA Sears 8725 W Sahara Ave The Lakes, NV 89163                                       |          | -           | 2005<br>Charge Account  |            |            |          | 421.00          |
| Account No.  LVNV Funding POB 10584 Greenville, SC 29603   |          |             | Representing:<br>CBUSA Sears                                      |            |            |          | Notice Only     |
| Account No.  Roundup Funding POB 91121 Seattle, WA 98111-9221  |          |             | Representing:<br>CBUSA Sears                                      |            |            |          | Notice Only     |
| Sheet no. <b>2</b> of <b>7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             | (Total of   | Sub        |            |          | 1,284.00        |

| In re Cha | arles B Delaine | Case No. |
|-----------|-----------------|----------|
|           | ,<br>Debtor     |          |

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)              | CODEBTOR | H W J C | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT  | DZLLQULDA | DISPUTED | AMOUNT OF CLAIM |
|--|----------|---------|---|-------------|-----------|----------|-----------------|
| Account No. xxxt001  CCB Credit Services P.O. Box 272 Springfield, IL 62705                                    |          | _       | 1993<br>Credit Card Purchases                                     |             | ED        |          | 689.00          |
| Account No. 6018  Chevron GE Money P O Box 530950 Atlanta, GA 30353-0950                                       |          | _       | 2007<br>Credit Card Purchases                                     |             |           |          | 389.00          |
| Account No. xxxm002  DCH Health Care 809 Univ Blvd E Tuscaloosa, AL 35401                                      |          | _       | 2006<br>Medical   |             |           |          | 100.00          |
| Account No.  CBSI P.O. Box 3227 Tuscaloosa, AL 35403   |          |         | Representing:<br>DCH Health Care                                  |             |           |          | Notice Only     |
| Account No.  Franklin Collection P.O. Box 3910 Tupelo, MS 38801  | -        |         | Representing:<br>DCH Health Care                                  |             |           |          | Notice Only     |
| Sheet no. <b>_3</b> of <b>_7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |         | (Total of   | Sub<br>this |           |          | 1,178.00        |

| In re | Charles B Delaine | Case No. |  |
|-------|-------------------|----------|--|
| -     |                   | Debtor   |  |

| CDEDITOD'S NAME   | Ç        | Hu          | sband, Wife, Joint, or Community  | CO          | U           | D<br>I        |                 |
|---|----------|-------------|---|-------------|-------------|---------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | ONT I NGENT | NLIQUIDATED | I S P U T E D | AMOUNT OF CLAIM |
| Account No.   |          |             |   | Т           | T<br>E      |               |                 |
| SM Servicing<br>P.O. Box 9500<br>Wilkes Barre, PA 18773   |          |             | Representing:<br>DCH Health Care  |             | D           |               | Notice Only     |
| Account No. 6018  |          |             | 2006  |             |             |               |                 |
| Ecast Settlement<br>P.O. Box 35480<br>Newark, NJ 07193-5480                                       |          | -           | Account   |             |             |               |                 |
|   |          |             |   |             |             |               | 728.00          |
| Account No. xxx9001   |          |             | 2005  |             |             |               |                 |
| Elan Financial<br>POB 108<br>Saint Louis, MO 63166  |          | -           | Credit Card Purchases   |             |             |               |                 |
|   |          |             |   |             |             |               | 733.00          |
| Account No. xxx058x  GEMB/WalMart P.O. Box 981400 El Paso, TX 79998                               |          | -           | 2000<br>Charge Account  |             |             |               | 309.00          |
| Account No. xV-07-7   | $\vdash$ |             | 2007  | $\vdash$    |             |               |                 |
| Hudson & Keyse, LLC<br>382 Blackbrook Rd.<br>Painesville, OH 44077                                |          | -           | LAWSUIT   |             |             |               | 5,153.00        |
| Sheet no. 4 of 7 sheets attached to Schedule of   |          |             |   | Sub         | tota        | 1             | 6,923.00        |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of t   | his         | pag         | e)            | 0,923.00        |

| In re | Charles B Delaine | Case No. |  |
|-------|-------------------|----------|--|
| -     |                   | Debtor   |  |

| CDEDITOD'S NAME   | ç        | Hu          | usband, Wife, Joint, or Community    | C           | U<br>N      | D<br>I |                 |
|---|----------|-------------|--------------------------------------|-------------|-------------|--------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>A<br>M | CONSIDERATION FOR CLAIM. IF CLAIM    | ONT I NGENT | L<br>Q      | S<br>P | AMOUNT OF CLAIM |
| Account No.  A. Allen, Ramsey P.O. Box 100247 Birmingham, AL 35210                                |          |             | Representing:<br>Hudson & Keyse, LLC | Т           | T<br>E<br>D |        | Notice Only     |
| Account No.  Chase POB 15153 Wilmington, DE 19850-5153  |          |             | Representing:<br>Hudson & Keyse, LLC |             |             |        | Notice Only     |
| Account No.  David Hall Ward P.O. Box 100247 Irondale, AL 35210                                   |          |             | Representing:<br>Hudson & Keyse, LLC |             |             |        | Notice Only     |
| Account No. 6018  Jeff Capsys 16 McLeland Road Saint Cloud, MN 56303                              |          | -           | 2006<br>Account                      |             |             |        | 250.00          |
| Account No. xxx9002  LVNV Funding POB 10584 Greenville, SC 29603                                  |          | -           | 2006<br>Credit Card Purchases        |             |             |        | 1,201.00        |
| Sheet no5 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims     |          | •           | S<br>(Total of tl                    | Subt        |             |        | 1,451.00        |

| In re | Charles B Delaine | Case No  |
|-------|-------------------|----------|
| -     |                   | , Debtor |

| CREDITOR'S NAME,  | Ç        | Hu          | sband, Wife, Joint, or Community  | CO        | U<br>N    | D     |                 |
|---|----------|-------------|---|-----------|-----------|-------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                              | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | ONTINGENT | LLQUL     | SPUTE | AMOUNT OF CLAIM |
| Account No.   |          |             |   | Т         | D A T E D |       |                 |
| Portfolio Recovery Associates LLC<br>Dept 922<br>P O Box 4115<br>Concord, CA 94524                            |          |             | Representing:<br>LVNV Funding   |           |           |       | Notice Only     |
| Account No.   |          | Г           |   |           |           |       |                 |
| Resurgent Acquisition L.L.C.<br>c/o Resurgent Capital Services<br>P.O. Box 10587<br>Greenville, SC 29603-0587 |          |             | Representing:<br>LVNV Funding   |           |           |       | Notice Only     |
| Account No. xxxt001   |          |             | 1998  |           |           |       |                 |
| OMAX/CBSD<br>2195 N 1200W<br>Mountain View, CA 94041  |          | _           | Credit Card Purchases   |           |           |       | 124.00          |
| Account No. xxx1066   |          |             | 1998  |           | _         | ┢     | 124.00          |
| RBS<br>1000 Lafayette Blvd<br>Bridgeport, CT 06604  |          | _           | Credit Card Purchases   |           |           |       | 820.00          |
| Account No. xxx5004   |          |             | 1995  |           |           |       |                 |
| RSHK/CBUSA<br>P.O. Box 8189<br>Gray, TN 37615   |          | _           | Charge Account  |           |           |       | 311.00          |
| Sheet no. 6 of 7 sheets attached to Schedule of   |          |             |   | ubt       |           |       | 1,255.00        |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of the   | .118      | Pag       | 50)   |                 |

| In re | Charles B Delaine | Case No |
|-------|-------------------|---------|
| -     |                   | Debtor  |

|   | _        | _           |      |   | <del></del>  | _   | _               | 1               |
|---|----------|-------------|------|---|--------------|-----|-----------------|-----------------|
| CREDITOR'S NAME,  | CO       | Hu          | lust | pand, Wife, Joint, or Community   | <b>−</b>   6 | UN  | D               |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)              | CODEBTOR | J<br>M<br>H | ۷    | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NT I NG E N  |     | D I S P U T E D | AMOUNT OF CLAIM |
| Account No. xxx201f   |          |             |      | 1998  | 7            | T   |                 |                 |
| Wells Fargo Financial<br>4143 121st Street<br>Urbandale, IA 50323                             |          | -           |      | Personal Loan   |              | D   |                 | 102.00          |
| Account No.   |          |             | †    |   | $\dagger$    |     |                 |                 |
|   |          |             |      |   |              |     |                 |                 |
| Account No.   |          |             | +    |   | +            |     |                 |                 |
|   |          |             |      |   |              |     |                 |                 |
|   |          |             |      |   |              |     |                 |                 |
| Account No.   |          |             |      |   |              |     |                 |                 |
|   |          |             |      |   |              |     |                 |                 |
| Account No.   |          |             | +    |   | +            | +   | +               |                 |
|   |          |             |      |   |              |     |                 |                 |
|   |          |             |      |   |              |     |                 |                 |
| Sheet no7 of _7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |             |      | (Total of   | Sub          |     |                 | 102.00          |
|   |          |             |      | (Report on Summary of S   | ,            | Tot | al              | 16,012.00       |

| In re | Charles B Delaine | Case No     |  |
|-------|-------------------|-------------|--|
| _     |                   | ,<br>Debtor |  |

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

| B6H | (Official For | rm 6H) | (12/07) |
|-----|---------------|--------|---------|
|-----|---------------|--------|---------|

| In re | Charles B Delaine | Case No. |  |
|-------|-------------------|----------|--|
|       |                   | Debtor   |  |

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|  | Check this box if debtor has no codebtor |
|--|--|
|--|--|

NAME AND ADDRESS OF CODEBTOR NAME AND ADDRESS OF CREDITOR

Anita Delaine 2073 Edinburgh Dr. Montgomery, AL 36116 Regions Bank P.O. Box 4409 Bridgeton, MO 63044

| In re | Charles | <b>B</b> Delaine |
|-------|---------|------------------|
|-------|---------|------------------|

| 7   |     | _   | , |
|-----|-----|-----|---|
| Del | bto | r(s | : |

Case No.

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| RELATIONSHIP(S):   None.   N  | Debtor's Marital Status:                             | DEPENDENTS O  | OF DEBTOR AND SI | POUSE    |                                       |        |
|---|--|---|------------------|----------|---------------------------------------|--------|
| Midowed   None.   SPOUSE  | Debtor's Wartan Status.                              |   |                  |          |                                       |        |
| Occupation   Name of Employer   Unemployed   Unemployed   |  |   |                  |          |                                       |        |
| Name of Employer  | Employment:  |   | SPOUSE           |          |                                       |        |
| How long employed   | Occupation   |   |                  |          |                                       |        |
| How long employed   | Name of Employer                                     | Unemployed  |                  |          |                                       |        |
| NCOME: (Estimate of average or projected monthly income at time case filed)   DEBTOR   SPOUSE   | • •  |   |                  |          |                                       |        |
| NCOME: (Estimate of average or projected monthly income at time case filed)   | 0 1 1  |   |                  |          |                                       |        |
| 1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)       \$ 0.00       \$ N/A         2. Estimate monthly overtime       \$ 0.00       \$ N/A         3. SUBTOTAL       \$ 0.00       \$ N/A         4. LESS PAYROLL DEDUCTIONS  | Tradition of Employer                                |   |                  |          |                                       |        |
| 1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)       \$ 0.00       \$ N/A         2. Estimate monthly overtime       \$ 0.00       \$ N/A         3. SUBTOTAL       \$ 0.00       \$ N/A         4. LESS PAYROLL DEDUCTIONS  | INCOME: (Estimate of average or p                    | projected monthly income at time case filed)          |                  | DEBTOR   |                                       | SPOUSE |
| 3. SUBTOTAL  4. LESS PAYROLL DEDUCTIONS  a. Payroll taxes and social security  b. Insurance c. Union dues d. Other (Specify):  5. SUBTOTAL OF PAYROLL DEDUCTIONS  5. SUBTOTAL OF PAYROLL DEDUCTIONS  6. TOTAL NET MONTHLY TAKE HOME PAY  7. Regular income from operation of business or profession or farm (Attach detailed statement) 8. 0.00 8. N/A 8. Income from real property 9. 0.00 9. N/A 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Unemployment (Specify): Unemployment (Specify): Unemployment (Specify): Tax refund averaged monthly 12. Pension or returnent income (Specify): Tax refund averaged monthly 14. SUBTOTAL OF LINES 7 THROUGH 13 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  16. ALIMONO S. N/A 16. ALIMONO S. N/A 17. ALIMONO S. N/A 18. ALIMONO S. N/A 19. ALIMONO S.  |  |   | \$               |          | \$                                    | N/A    |
| 4. LESS PAYROLL DEDUCTIONS  a. Payroll taxes and social security  b. Insurance  c. Union dues  d. Other (Specify):  S. UBOTOTAL OF PAYROLL DEDUCTIONS  6. TOTAL NET MONTHLY TAKE HOME PAY  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. 10.00  8. N/A  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. 10.00  8. N/A  8. 10.00  8. N/A  9. Interest and dividends  9. 10.00  9. N/A  10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above dependents listed above (Specify):  Unemployment  Widow's Comp.  12. Pension or retirement income  (Specify):  Tax refund averaged monthly  Family contribution  14. SUBTOTAL OF LINES 7 THROUGH 13  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  8. 1.410.00  8. N/A  N/A  1.410.00  8. N/A  1.5 AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  | 2. Estimate monthly overtime                         |   | \$               | 0.00     | \$                                    | N/A    |
| 4. LESS PAYROLL DEDUCTIONS  a. Payroll taxes and social security  b. Insurance  c. Union dues  d. Other (Specify):  S. UBOTOTAL OF PAYROLL DEDUCTIONS  6. TOTAL NET MONTHLY TAKE HOME PAY  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. 10.00  8. N/A  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. 10.00  8. N/A  8. 10.00  8. N/A  9. Interest and dividends  9. 10.00  9. N/A  10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above dependents listed above (Specify):  Unemployment  Widow's Comp.  12. Pension or retirement income  (Specify):  Tax refund averaged monthly  Family contribution  14. SUBTOTAL OF LINES 7 THROUGH 13  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  8. 1.410.00  8. N/A  N/A  1.410.00  8. N/A  1.5 AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  |  |   |                  |          |                                       |        |
| a. Payroll taxes and social security b. Insurance c. Union dues d. Other (Specify): \$ 0.00 \$ N/A c. Union dues d. Other (Specify): \$ 0.00 \$ N/A \$ 0. | 3. SUBTOTAL  |   | \$ _             | 0.00     | \$                                    | N/A    |
| a. Payroll taxes and social security b. Insurance c. Union dues d. Other (Specify): \$ 0.00 \$ N/A c. Union dues d. Other (Specify): \$ 0.00 \$ N/A \$ 0. |  |   |                  |          |                                       |        |
| b. Insurance c. Union dues d. Other (Specify):  | 4. LESS PAYROLL DEDUCTIONS                           | }   |                  |          |                                       |        |
| c. Union dues d. Other (Specify):   | <ul> <li>a. Payroll taxes and social secu</li> </ul> | rity  | \$ _             | 0.00     | \$                                    | N/A    |
| d. Other (Specify):   | b. Insurance   |   | \$               | 0.00     | \$                                    |        |
| 5. SUBTOTAL OF PAYROLL DEDUCTIONS  5. O.00 \$ N/A  6. TOTAL NET MONTHLY TAKE HOME PAY  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. O.00 \$ N/A  8. Income from real property  9. O.00 \$ N/A  9. Interest and dividends  10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above  11. Social security or government assistance  (Specify): Unemployment \$ 403.00 \$ N/A  Widow's Comp.  12. Pension or retirement income  13. Other monthly income  (Specify): Tax refund averaged monthly \$ 100.00 \$ N/A  Family contribution  14. SUBTOTAL OF LINES 7 THROUGH 13  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)   | c. Union dues  | \$  | 0.00             | \$       | N/A                                   |        |
| 5. SUBTOTAL OF PAYROLL DEDUCTIONS  5. SUBTOTAL OF PAYROLL DEDUCTIONS  6. TOTAL NET MONTHLY TAKE HOME PAY  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. Income from real property  9. Interest and dividends  10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above  11. Social security or government assistance  (Specify): Unemployment  Widow's Comp.  12. Pension or retirement income  13. Other monthly income  (Specify): Tax refund averaged monthly  Family contribution  14. SUBTOTAL OF LINES 7 THROUGH 13  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  | d. Other (Specify):                                  |   | \$               | 0.00     | \$                                    | N/A    |
| 6. TOTAL NET MONTHLY TAKE HOME PAY  7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. Income from real property  9. Interest and dividends  10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above  11. Social security or government assistance  (Specify): Unemployment  |  |   | \$               | 0.00     | \$                                    | N/A    |
| 7. Regular income from operation of business or profession or farm (Attach detailed statement)  8. Income from real property  9. Interest and dividends  10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above  11. Social security or government assistance  (Specify):  Unemployment  Widow's Comp.  12. Pension or retirement income  13. Other monthly income  (Specify):  Tax refund averaged monthly Family contribution  14. SUBTOTAL OF LINES 7 THROUGH 13  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  16. AUENAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  17. AUENAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)   | 5. SUBTOTAL OF PAYROLL DED                           | DUCTIONS  | \$_              | 0.00     | \$                                    | N/A    |
| 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Unemployment \$ 403.00 \$ N/A  12. Pension or retirement income \$ 0.00 \$ N/A  13. Other monthly income (Specify): Tax refund averaged monthly family contribution \$ 250.00 \$ N/A  14. SUBTOTAL OF LINES 7 THROUGH 13 \$ 1,410.00 \$ N/A  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$ 1,410.00 \$ N/A  | 6. TOTAL NET MONTHLY TAKE                            | HOME PAY  | \$_              | 0.00     | \$                                    | N/A    |
| 8. Income from real property 9. Interest and dividends 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above 11. Social security or government assistance (Specify): Unemployment \$ 403.00 \$ N/A  12. Pension or retirement income \$ 0.00 \$ N/A  13. Other monthly income (Specify): Tax refund averaged monthly family contribution \$ 250.00 \$ N/A  14. SUBTOTAL OF LINES 7 THROUGH 13 \$ 1,410.00 \$ N/A  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$ 1,410.00 \$ N/A  | 7 Pagular income from operation of                   | business or profession or form (Attach detailed state | umant) \$        | 0.00     | •                                     | NI/A   |
| 9. Interest and dividends \$ 0.00 \$ N/A 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ 0.00 \$ N/A 11. Social security or government assistance (Specify): Unemployment \$ 403.00 \$ N/A  |  | business of profession of farm (Attach detailed state | ment) 5 _        |          | · · · · · · · · · · · · · · · · · · · |        |
| 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above  11. Social security or government assistance (Specify): Unemployment  |  | φ <u></u>   |                  | φ —      |                                       |        |
| A composite the state of the   |  | t navments navable to the debtor for the debtor's use | or that of       | 0.00     | Φ                                     | IN/A   |
| (Specify):         Unemployment Widow's Comp.         \$ 403.00 \$ N/A           12. Pension or retirement income         \$ 657.00 \$ N/A           13. Other monthly income (Specify):         Tax refund averaged monthly  |  | t payments payable to the debtor for the debtor's use | \$               | 0.00     | \$                                    | N/A    |
| Widow's Comp.   | 11. Social security or government as                 | sistance  | _                |          |                                       |        |
| 12. Pension or retirement income       \$ 0.00 \$ N/A         13. Other monthly income       \$ 100.00 \$ N/A         (Specify): Tax refund averaged monthly Family contribution       \$ 250.00 \$ N/A         14. SUBTOTAL OF LINES 7 THROUGH 13       \$ 1,410.00 \$ N/A         15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)       \$ 1,410.00 \$ N/A   | (Specify): Unemploymen                               | nt  |                  |          | \$                                    |        |
| 13. Other monthly income       (Specify):       Tax refund averaged monthly       \$ 100.00       \$ N/A         14. SUBTOTAL OF LINES 7 THROUGH 13       \$ 250.00       \$ N/A         15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)       \$ 1,410.00       \$ N/A  |  | р.  |                  |          | \$                                    |        |
| (Specify):         Tax refund averaged monthly Family contribution         \$ 100.00  | 12. Pension or retirement income                     |   | \$               | 0.00     | \$                                    | N/A    |
| Family contribution         \$ 250.00         N/A           14. SUBTOTAL OF LINES 7 THROUGH 13         \$ 1,410.00         \$ N/A           15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)         \$ 1,410.00         \$ N/A   |  |   |                  |          |                                       |        |
| 14. SUBTOTAL OF LINES 7 THROUGH 13 \$ 1,410.00 \$ N/A  15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) \$ 1,410.00 \$ N/A  |  |   | \$               |          | \$                                    |        |
| 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  \$ 1,410.00 \$ N/A  | Family contrib                                       | oution  |                  | 250.00   | \$                                    | N/A    |
| 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)  \$ 1,410.00 \$ N/A  | 1/ SURTOTAL OF LINES 7 THRO                          | OUGH 13   | •                | 1 410 00 | •                                     | N/A    |
| ψ   | 14. SODIOTAL OF LINES / THRO                         | 700H 13   | _ <del>-</del>   | 1,710.00 | Φ <u></u>                             | 14/1   |
| 16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15) \$ 1,410.00   | 15. AVERAGE MONTHLY INCOM                            | AE (Add amounts shown on lines 6 and 14)              | \$ _             | 1,410.00 | \$                                    | N/A    |
|   | 16. COMBINED AVERAGE MON                             | 15)   | \$               | 1,410.0  | 00                                    |        |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| In re | Charl | es R | Del | aine |
|-------|-------|------|-----|------|

Debtor(s)

Case No.

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of

| expenditures labeled "Spouse."   |    |          |
|--|----|----------|
| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$ | 504.04   |
| a. Are real estate taxes included? Yes No _X_  |    |          |
| b. Is property insurance included? Yes No X  |    |          |
| 2. Utilities: a. Electricity and heating fuel  | \$ | 80.00    |
| b. Water and sewer   | \$ | 19.00    |
| c. Telephone   | \$ | 35.00    |
| d. Other   | \$ | 0.00     |
| 3. Home maintenance (repairs and upkeep)   | \$ | 0.00     |
| 4. Food  | \$ | 100.00   |
| 5. Clothing  | \$ | 0.00     |
| 6. Laundry and dry cleaning  | \$ | 0.00     |
| 7. Medical and dental expenses   | \$ | 10.00    |
| 8. Transportation (not including car payments)   | \$ | 50.00    |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$ | 0.00     |
| 10. Charitable contributions   | \$ | 0.00     |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  |    |          |
| a. Homeowner's or renter's   | \$ | 0.00     |
| b. Life  | \$ | 0.00     |
| c. Health  | \$ | 0.00     |
| d. Auto  | \$ | 45.00    |
| e. Other   | \$ | 0.00     |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  |    |          |
| (Specify)  | \$ | 0.00     |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)   |    |          |
| a. Auto  | \$ | 0.00     |
| b. Other   | \$ | 0.00     |
| c. Other   | \$ | 0.00     |
| 14. Alimony, maintenance, and support paid to others   | \$ | 0.00     |
| 15. Payments for support of additional dependents not living at your home  | \$ | 0.00     |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$ | 0.00     |
| 17. Other  | \$ | 0.00     |
| Other  | \$ | 0.00     |
|  |    |          |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 843.04   |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:                                 |    |          |
| 20. STATEMENT OF MONTHLY NET INCOME  | -  |          |
| a. Average monthly income from Line 15 of Schedule I   | \$ | 1,410.00 |
| b. Average monthly expenses from Line 18 above   | \$ | 843.04   |
| c Monthly net income (a minus h)   | \$ | 566 96   |

## **United States Bankruptcy Court** Northern District of Alabama

| In re | Charles B Delaine  |              |   | Case No.   |                       |  |  |  |  |
|-------|--|--------------|---|------------|-----------------------|--|--|--|--|
|       |  |              | Debtor(s)                               | Chapter    | 13                    |  |  |  |  |
|       |  |              |   |            |                       |  |  |  |  |
|       |  |              |   |            |                       |  |  |  |  |
|       | <b>DECLARATION C</b>   | ONCERN       | ING DEBTOR'S SO                         | CHEDUL     | ES                    |  |  |  |  |
|       | DECLARATION UNDER F  | PENALTY (    | OF PERHIRV RV INDIVI                    | DHAL DEI   | RTOR                  |  |  |  |  |
|       | DECLARATION UNDER I  | ENALIT       | DI LEKJOKI DI INDIVI                    | IDUAL DEI  | DIOK                  |  |  |  |  |
|       |  |              |   |            |                       |  |  |  |  |
|       |  |              |   |            |                       |  |  |  |  |
|       | I declare under penalty of perjury the sheets, and that they are true and correct to the |              |   |            | les, consisting of 22 |  |  |  |  |
|       | sheets, and that they are true and correct to the  | ic best of m | y knowledge, information,               | and benef. |                       |  |  |  |  |
|       |  |              |   |            |                       |  |  |  |  |
|       | W 1 00 0044  | ~.           | //0/ / 551:                             |            |                       |  |  |  |  |
| Date  | March 30, 2011   | Signature    | /s/ Charles B Delaine Charles B Delaine |            |                       |  |  |  |  |
|       |  |              | Debtor                                  |            |                       |  |  |  |  |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

## United States Bankruptcy Court Northern District of Alabama

| In re | Charles B Delaine |           | Case No. |    |
|-------|-------------------|-----------|----------|----|
|       |                   | Debtor(s) | Chapter  | 13 |
|       |                   |           |          |    |

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$15,498.00 2010: Debtor Employment Income \$15,000.00 2009: Debtor Employment Income

## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,866.00 2011 YTD: Debtor Unemployment

## 3. Payments to creditors

None П

## Complete a. or b., as appropriate, and c.

*Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Bank of York P.O. Box 96 York, AL 36925

filed.)

DATES OF **PAYMENTS** January 2011 February 2011 March 2011

AMOUNT PAID \$1,512.12

AMOUNT STILL **OWING** \$8.000.00

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850°. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> DATES OF PAYMENTS/

NAME AND ADDRESS OF CREDITOR

PAID OR VALUE OF TRANSFERS **TRANSFERS** 

AMOUNT STILL OWING

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT

AMOUNT STILL **OWING** 

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

CAPTION OF SUIT

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER Hudson/Keyse assignee of Chase Bank vs Charles B. Delaine DV-07-7

NATURE OF **PROCEEDING**  COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

## 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

## 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Camron Law 2330 University Blvd. Ste. 314 Tuscaloosa, AL 35401 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 3/11 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$550.00

NAME AND ADDRESS OF PAYEE

Hummingbird Credit Counseling 3737 Glenwood Ave Ste 100-106 Raleigh, NC 27612-5515 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 3/11 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$43.00

## 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

## 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

**ADDRESS** 

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

## NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

## 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

## 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | March 30, 2011 | Signature | /s/ Charles B Delaine |
|------|----------------|-----------|-----------------------|
|      | _              |           | Charles B Delaine     |
|      |                |           | Debtor                |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

## United States Bankruptcy Court Northern District of Alabama

|        | 110   | of their District of Alabama   | u  |                                      |
|--------|---|--|--|--------------------------------------|
| In re  | Charles B Delaine   | Debtor(s)  | Case No. Chapter   | 13                                   |
|        |   | Debtor(s)  | Chapter  | 10                                   |
|        | DISCLOSURE OF COMP  | PENSATION OF ATTOR   | RNEY FOR DE  | EBTOR(S)                             |
| c      | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy compensation paid to me within one year before the per rendered on behalf of the debtor(s) in contemplation   | filing of the petition in bankruptcy   | , or agreed to be pai  | d to me, for services rendered or to |
|        | For legal services, I have agreed to accept   |  | \$   | 2,600.00                             |
|        | Prior to the filing of this statement I have receive  | ed   | \$   | 550.00                               |
|        | Balance Due   |  | \$   | 2,050.00                             |
| 2. T   | The source of the compensation paid to me was:  |  |  |                                      |
|        | ■ Debtor □ Other (specify):   |  |  |                                      |
| 3. Т   | The source of compensation to be paid to me is:   |  |  |                                      |
|        | ■ Debtor □ Other (specify):   |  |  |                                      |
| 1. I   | I have not agreed to share the above-disclosed co   | ompensation with any other person  | unless they are mem  | bers and associates of my law firm.  |
| [      | ☐ I have agreed to share the above-disclosed competer copy of the agreement, together with a list of the  |  |  |                                      |
| 5. I   | In return for the above-disclosed fee, I have agreed to   | o render legal service for all aspect  | s of the bankruptcy c  | ase, including:                      |
| b<br>c | <ul> <li>Analysis of the debtor's financial situation, and re</li> <li>Preparation and filing of any petition, schedules, s</li> <li>Representation of the debtor at the meeting of cre</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors t reaffirmation agreements and applications</li> </ul> | statement of affairs and plan which<br>ditors and confirmation hearing, ar<br>to reduce to market value; exe | may be required;<br>ad any adjourned hea<br>emption planning | rings thereof;                       |
|        | 522(f)(2)(A) for avoidance of liens on  |  | and ming of mot  | ions pursuant to 11 000              |
| 5. E   | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.   |  |  | es, relief from stay actions or      |
|        |   | CERTIFICATION  |  |                                      |
|        | certify that the foregoing is a complete statement of ankruptcy proceeding.   | any agreement or arrangement for   | payment to me for re   | epresentation of the debtor(s) in    |
| Dated  | : March 30, 2011  | /s/ Rod Cameron  |  |                                      |
|        |   | Rod Cameron Sh   | irley  |                                      |
|        |   | Camron Law<br>2330 University B  | lvd Ste 314  |                                      |
|        |   | Tuscaloosa, AL 3   |  |                                      |
|        |   | 205-349-2455 Fa  |  |                                      |
|        |   | RodCamronLaw@  | Bellsouth.net  |                                      |

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ALABAMA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

### **United States Bankruptcy Court** Northern District of Alabama

| In re   | Charles B Delaine                     | Case No. |    |  |  |  |  |  |
|---|---------------------------------------|----------|----|--|--|--|--|--|
|   | Debtor(s)                             | Chapter  | 13 |  |  |  |  |  |
|   |                                       |          |    |  |  |  |  |  |
| CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) |                                       |          |    |  |  |  |  |  |
|   | UNDER § 342(b) OF THE BANKRUPTCY CODE |          |    |  |  |  |  |  |

## **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Bank of York Capital One Jeff Capsys 15000 Capital One Dr. P.O. Box 96 16 McLeland Road Richmond, VA 23238 York, AL 36925 Saint Cloud, MN 56303 Investment Retriever CBUSA Sears LVNV Funding 8725 W Sahara Ave POB 10584 4511 Golden Foothills Greenville, SC 29603 El Dorado Hills, CA 95762 The Lakes, NV 89163 Regions Bank CCB Credit Services OMAX/CBSD P.O. Box 4409 P.O. Box 272 2195 N 1200W Bridgeton, MO 63044 Springfield, IL 62705 Mountain View, CA 94041 **RBS** 1st MS Federal Credit Union Chevron GE Money POB 5774 P O Box 530950 1000 Lafayette Blvd Atlanta, GA 30353-0950 Bridgeport, CT 06604 Meridian, MS 39301 American Express DCH Health Care RSHK/CBUSA P.O. Box 7871 809 Univ Blvd E P.O. Box 8189 Fort Lauderdale, FL 33329 Tuscaloosa, AL 35401 Gray, TN 37615 Anita Delaine Ecast Settlement Wells Fargo Financial 2073 Edinburgh Dr. 4143 121st Street P.O. Box 35480 Montgomery, AL 36116 Newark, NJ 07193-5480 Urbandale, IA 50323 AT & T Elan Financial A. Allen, Ramsey P.O. Box 105068 POB 108 P.O. Box 100247 Atlanta, GA 30348 Saint Louis, MO 63166 Birmingham, AL 35210 GEMB/WalMart AFNI B-Real c/o NCO P.O. Box 981400 P.O. Box 3427 2101 4th Ave Ste 1030 El Paso, TX 79998 Bloomington, IL 61702 Seattle, WA 98121-2317

Hudson & Keyse, LLC

382 Blackbrook Rd.

Painesville, OH 44077

Cavalry Portfolio Services

Hawthorne, NY 10532

7 Skyline Dr

Bank One

P.O. Box 94014

Palatine, IL 60094-4014

CBSI P.O. Box 3227 Tuscaloosa, AL 35403

Chase POB 15153 Wilmington, DE 19850-5153

David Hall Ward P.O. Box 100247 Irondale, AL 35210

Franklin Collection P.O. Box 3910 Tupelo, MS 38801

Portfolio Recovery Associates LLC Dept 922 P O Box 4115 Concord, CA 94524

Resurgent Acquisition L.L.C. c/o Resurgent Capital Services P.O. Box 10587 Greenville, SC 29603-0587

Roundup Funding POB 91121 Seattle, WA 98111-9221

SM Servicing P.O. Box 9500 Wilkes Barre, PA 18773 B22C (Official Form 22C) (Chapter 13) (12/10)

| In re   | Charles B Delaine | According to the calculations required by this statement:           |
|---------|-------------------|---|
|         | Debtor(s)         | ■ The applicable commitment period is 3 years.                      |
| Case Nu |                   | ☐ The applicable commitment period is 5 years.                      |
|         | (If known)        | ☐ Disposable income is determined under § 1325(b)(3).               |
|         |                   | ■ Disposable income is not determined under § 1325(b)(3).           |
|         |                   | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

### CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

|   |   | Par   | rt I. F   | REPORT OF IN   | COM               | 1E  |                     |          |                               |                                |
|---|---|---|---|--|-------------------|---|---------------------|----------|-------------------------------|--------------------------------|
| 1 | a. <b></b>  | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a. ■ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.  b. □ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.   |   |  |                   |   |                     |          |                               |                                |
|   | All fi  | All figures must reflect average monthly income received from all sources, derived during the calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. |   |  |                   |   |                     |          | olumn A<br>Debtor's<br>Income | Column B<br>Spouse's<br>Income |
| 2 | Gross   | s wages, salary, tips, bonuses, overtime, con   | nmiss   | sions.   |                   |   |                     | \$       | 0.00                          | \$                             |
| 3 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. |   |   |  |                   |   | usiness,<br>enter a |          |                               |                                |
|   | a.  | Gross receipts  | \$  | Debtor 0.00  | \$                | Spouse  |                     |          |                               |                                |
|   | b.  | Ordinary and necessary business expenses  | \$  | 0.00   |                   |   |                     |          |                               |                                |
|   | c.  | Business income   | Sub   | tract Line b from  | Line              | a   |                     | \$       | 0.00                          | \$                             |
|   |   | s and other real property income. Subtract l  | LINC  |  |                   |   |                     |          |                               |                                |
| 4 |   | oppropriate column(s) of Line 4. Do not enter a column of the operating expenses entered on Line b  Gross receipts Ordinary and necessary operating expenses Rent and other real property income  | a nun as a \$ \$ \$   | nber less than zer   | o. <b>D</b> rt IV | o not include. Spouse   | e any               | \$       | 0.00                          | \$                             |
| 5 | a.<br>b.<br>c.  | Gross receipts Ordinary and necessary operating expenses  | a nun as a \$ \$ \$   | deduction in Par<br>Debtor 0.00  | o. <b>D</b> rt IV | o not include. Spouse   | e any               | \$<br>\$ | 0.00                          | \$                             |
|   | a.<br>b.<br>c.  | Gross receipts Ordinary and necessary operating expenses Rent and other real property income  | a nun as a \$ \$ \$   | deduction in Par<br>Debtor 0.00  | o. <b>D</b> rt IV | o not include. Spouse   | e any               |          |                               |                                |
| 5 | a. b. c. Inter Pensi Any a exper purpodebto   | Gross receipts Ordinary and necessary operating expenses Rent and other real property income est, dividends, and royalties.   | s num as a \$ \$ \$ Sub as a  s con a r ts, income are ported | Debtor  0.00  otract Line b from  cegular basis, for cluding child sup nee payments or a ed in only one col  | o. D rt IV        | o not include  Spouse  e a  household a paid for tha nts paid by th                 | e any  nt ne t is   | \$       | 0.00                          | \$ \$                          |
| 5 | a. b. c. Inter Pensi Any a exper purp debto listed Unen Howe benef or B,  | Gross receipts Ordinary and necessary operating expenses Rent and other real property income  est, dividends, and royalties.  ion and retirement income.  amounts paid by another person or entity, onses of the debtor or the debtor's dependent ose. Do not include alimony or separate main or's spouse. Each regular payment should be re-                    | a nun a sa s        | Debtor  O.00  Otract Line b from  Degular basis, for cluding child sup nee payments or a bed in only one colum B.  appropriate columing received by yellow y | o. Drt IV         | e a  household paid for tha nts paid by th ; if a paymen ) of Line 8. r your spouse | e any  nt ne t is   | \$       | 0.00                          | \$                             |

| 9  | Income from all other sources. Specify source and an on a separate page. Total and enter on Line 9. Do not maintenance payments paid by your spouse, but inc separate maintenance. Do not include any benefits r payments received as a victim of a war crime, crime ag international or domestic terrorism.  |  |  |                                 |   |       |           |
|----|---|--|--|---------------------------------|---|-------|-----------|
|    |   | Debtor   | Spouse   |                                 |   |       |           |
|    | a. Family Contributions \$  | 250.00   | \$   |                                 | ¢ 250                                       | 00 6  |           |
|    | Subtotal. Add Lines 2 thru 9 in Column A, and, if Col   | uma Dia aomalata   | od add Lines 2 th  |                                 | \$ 250.                                     | 00 \$ |           |
| 10 | in Column B. Enter the total(s).  | uniii B is complete  | ed, add Lilles 2 til   |                                 | <b>\$ 653.</b>                              | 00 \$ |           |
| 11 | <b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.   |  |  |                                 |   |       |           |
|    | Part II. CALCULATION O  | F § 1325(b)(4)   | COMMITM  | ENT P                           | ERIOD                                       |       |           |
| 12 | Enter the amount from Line 11   |  |  |                                 |   | \$    | 653.00    |
| 13 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.  a. \$ b. \$ c. \$ \$ C. \$ S |  |  |                                 |   |       |           |
|    | Total and enter on Line 13  |  |  |                                 |   | \$    | 0.00      |
| 14 | Subtract Line 13 from Line 12 and enter the result.   |  |  |                                 |   |       |           |
| 15 | Annualized current monthly income for § 1325(b)(4 enter the result.   | ). Multiply the an   | nount from Line 1  | 4 by the 1                      | number 12 and                               | \$    | 7,836.00  |
| 16 | <b>Applicable median family income.</b> Enter the median information is available by family size at <a href="www.usdoj.g">www.usdoj.g</a>   | ov/ust/ or from the  | clerk of the bank  | ruptcy co                       |   |       |           |
|    | a. Enter debtor's state of residence:   | b. Enter deb   | tor's household si   | ze:                             | 1   | \$    | 38,642.00 |
| 17 | Application of § 1325(b)(4). Check the applicable box and proceed as directed.  The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at top of page 1 of this statement and continue with this statement.  The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years at the top of page 1 of this statement and continue with this statement.   |  |  |                                 |   |       |           |
|    | Part III. APPLICATION OF § 1325   | (b)(3) FOR DETE  | ERMINING DISI  | POSABL                          | E INCOME                                    | 1     |           |
| 18 | Enter the amount from Line 11.  |  |  |                                 |   | \$    | 653.00    |
| 19 | Marital Adjustment. If you are married, but are not fi any income listed in Line 10, Column B that was NOT debtor or the debtor's dependents. Specify in the lines payment of the spouse's tax liability or the spouse's sup dependents) and the amount of income devoted to each separate page. If the conditions for entering this adjust a.  b. c.   | paid on a regular<br>below the basis for<br>oport of persons of<br>a purpose. If neces | basis for the hous<br>excluding the Co<br>her than the debto<br>sary, list additiona | ehold expolumn B is or or the d | penses of the<br>income(such as<br>lebtor's |       |           |
|    | Total and enter on Line 19.   |  |  |                                 |   |       | 0.00      |
| 20 | Current monthly income for § 1325(b)(3). Subtract I   | Line 19 from Line  | 18 and enter the r   | esult.                          |   | \$    | 653.00    |
|    |   |  |  |                                 |   |       |           |

| 21  | <b>Annualized current monthly income for § 1325(b)(3).</b> Multiply the amount from Line 20 by the number 12 an enter the result.   |   |   |                                  |                        |  | 0 by the number 12 and  | \$ | 7,836.00      |
|-----|---|---|---|----------------------------------|------------------------|--|---|----|---------------|
| 22  | Applica   | able median family incom  | e. Enter the amount from  | n Lin                            | e 16.                  |  |   | \$ | 38,642.00     |
| 23  | <ul> <li>Application of § 1325(b)(3). Check the applicable box and proceed as directed.</li> <li>□ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is detern 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.</li> <li>■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part</li> </ul>   |   |   |                                  |                        |  |   |    | nined under § |
|     |   | Part IV. CA   | ALCULATION C  | )F I                             | EDU                    | CTIONS FR  | OM INCOME   |    | <u>·</u>      |
|     |   | Subpart A: Do   | eductions under Star  | ıdaro                            | ds of tl               | ne Internal Reve   | nue Service (IRS)   |    |               |
| 24A | Enter in applical bankruj   | al Standards: food, appar<br>n Line 24A the "Total" amo<br>ble number of persons. (The<br>ptcy court.) The applicable<br>r federal income tax return, | ount from IRS National and information is availate number of persons is the | Stand<br>ble at<br>e nun         | ards for www.unber tha | Allowable Living usdoj.gov/ust/ or from twould currently but would currently but the state of th | Expenses for the om the clerk of the e allowed as exemptions  | \$ |               |
| 24B | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line al by Line b1 to obtain a total amount for persons under 65, and enter the result in   |   |   |                                  |                        |  | onal Standards for able at cable number of persons of are 65 years of age or ory that would currently ional dependents whom and enter the result in Line 24B. |    |               |
|     | Person  | ns under 65 years of age  |   | Persons 65 years of age or older |                        |  |   |    |               |
|     | a1.   | Allowance per person  |   | a2.                              |                        | ance per person  |   |    |               |
|     | b1.   | Number of persons   | <del> </del>  | b2.                              |                        | er of persons  |   |    |               |
|     | c1.   | Subtotal  |   | c2.                              | Subto                  | tal  |   | \$ |               |
| 25A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.  |   |   |                                  |                        |  | nis information is<br>e family size consists of   | \$ |               |
| 25B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rent expense  b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47  c. Net mortgage/rental expense  Subtract Line b from Line a. |   |   |                                  |                        |  | \$  |    |               |
| 26  | 25B do<br>Standar   | Standards: housing and under the set of accurately computereds, enter any additional antion in the space below:                                       | the allowance to which  | you a                            | re entitl              | ed under the IRS H   | Iousing and Utilities   | \$ |               |

|     | <b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.   |  |    |  |  |  |  |
|-----|---|--|----|--|--|--|--|
| 27A | Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. $\square$ 0 $\square$ 1 $\square$ 2 or more.   |  |    |  |  |  |  |
|     | If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a>  | e "Operating Costs" amount from IRS Local<br>e applicable Metropolitan Statistical Area or | \$ |  |  |  |  |
| 27B | <b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)   |  |    |  |  |  |  |
|     | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)   1  2 or more.   |  |    |  |  |  |  |
| 28  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Lithe result in Line 28. <b>Do not enter an amount less than zero.</b>   | court); enter in Line b the total of the Average   |    |  |  |  |  |
|     | a. IRS Transportation Standards, Ownership Costs  | \$   |    |  |  |  |  |
|     | Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47   | \$   |    |  |  |  |  |
|     | c. Net ownership/lease expense for Vehicle 1  | Subtract Line b from Line a.   | \$ |  |  |  |  |
| 29  | the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. <b>Do not enter an amount less than zero.</b> a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle  b. 2, as stated in Line 47 |  |    |  |  |  |  |
|     | c. Net ownership/lease expense for Vehicle 2  | Subtract Line b from Line a.   | \$ |  |  |  |  |
| 30  | Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale  | come taxes, self employment taxes, social  | \$ |  |  |  |  |
| 31  | Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu   | retirement contributions, union dues, and  | \$ |  |  |  |  |
| 32  | Other Necessary Expenses: life insurance. Enter total average monlife insurance for yourself. Do not include premiums for insurance any other form of insurance.  |  | \$ |  |  |  |  |
| 33  | Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.  |  | \$ |  |  |  |  |
| 34  | Other Necessary Expenses: education for employment or for a ph<br>the total average monthly amount that you actually expend for educat<br>education that is required for a physically or mentally challenged dep<br>providing similar services is available.  | ion that is a condition of employment and for  | \$ |  |  |  |  |
| 35  | Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. <b>Do</b>  |  | \$ |  |  |  |  |
| 36  | Other Necessary Expenses: health care. Enter the total average month health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts  | our dependents, that is not reimbursed by the amount entered in Line 24B. <b>Do not</b>    | \$ |  |  |  |  |

| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. |    |  |  |  |  |  |
|----|--|----|--|--|--|--|--|
| 38 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.  |    |  |  |  |  |  |
|    | Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37  |    |  |  |  |  |  |
|    | <b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  |    |  |  |  |  |  |
| 39 | a. Health Insurance \$   |    |  |  |  |  |  |
|    | b. Disability Insurance \$   |    |  |  |  |  |  |
|    | c. Health Savings Account \$   |    |  |  |  |  |  |
|    | Total and enter on Line 39   | \$ |  |  |  |  |  |
|    | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$  |    |  |  |  |  |  |
| 40 | Continued contributions to the care of household or family members. Enter the total average actual monthly   |    |  |  |  |  |  |
| 41 | 41 <b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  |    |  |  |  |  |  |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local   |    |  |  |  |  |  |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary  |    |  |  |  |  |  |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National  |    |  |  |  |  |  |
| 45 | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.   | \$ |  |  |  |  |  |
| 46 | Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.  | \$ |  |  |  |  |  |
|    |  |    |  |  |  |  |  |

|    |   |  | Subpart C: Deductions for De   | ebt 1 | Payment         |                  |    |
|----|---|--|--|-------|-----------------|------------------|----|
| 47 | own,<br>check<br>sched  | operty that you<br>Payment, and<br>tal of all amounts<br>the bankruptcy<br>Average Monthly |  |       |                 |                  |    |
|    | Name of Creditor Property Securing the Debt Average Monthly include taxes Payment or insurance  |  |  |       |                 |                  |    |
|    | a.  |  |  | \$    |                 | □yes □no         |    |
|    |   |  |  | T     | otal: Add Lines |                  | \$ |
| 48 | Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.  Name of Creditor  Property Securing the Debt  1/60th of the Cure Amount |  |  |       |                 |                  |    |
|    | a.  |  |  |       | \$              | Total: Add Lines | \$ |
| 49 | prior   | ity tax, child support and alin  | r claims. Enter the total amount, divided nony claims, for which you were liable at such as those set out in Line 33.      |       |                 |                  | \$ |
| 50 | Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.  a. Projected average monthly Chapter 13 plan payment.  b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  c. Average monthly administrative expense of chapter 13 case  Total: Multiply Lines a and b  |  |  |       |                 |                  | \$ |
| 51 | Tota  | l Deductions for Debt Paym   | ent. Enter the total of Lines 47 through 5   | 50.   |                 |                  | \$ |
|    |   |  | Subpart D: Total Deductions f  | ron   | 1 Income        |                  | •  |
| 52 | Tota  | l of all deductions from inco  | ome. Enter the total of Lines 38, 46, and 3  | 51.   |                 |                  | \$ |
|    |   | Part V. DETERN   | MINATION OF DISPOSABLE   | INC   | OME UNDI        | ER § 1325(b)(2)  | )  |
| 53 | Total current monthly income. Enter the amount from Line 20.  |  |  |       |                 |                  | \$ |
| 54 | paym  | ents for a dependent child, re   | nly average of any child support payments eported in Part I, that you received in accessary to be expended for such child. |       |                 |                  | \$ |
| 55 | wage  |  | Enter the monthly total of (a) all amounted retirement plans, as specified in § 541(excified in § 362(b)(19).              |       |                 |                  | \$ |
| 56 | Tota  | l of all deductions allowed u  | ander § 707(b)(2). Enter the amount from   | n Lin | e 52.           |                  | \$ |

|    | Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable. |   |        |                                  |    |  |  |
|----|---|---|--------|----------------------------------|----|--|--|
| 57 |   | Nature of special circumstances                                   | Amo    | ount of Expense                  |    |  |  |
|    | a.  |   | \$     |                                  |    |  |  |
|    | b.  |   | \$     |                                  |    |  |  |
|    | c.  |   | \$     |                                  |    |  |  |
|    |   |   | Tota   | al: Add Lines                    | \$ |  |  |
| 58 | Total result  | adjustments to determine disposable income. Add the amounts on I  | ines   | 54, 55, 56, and 57 and enter the | \$ |  |  |
| 59 | Mont  | hly Disposable Income Under § 1325(b)(2). Subtract Line 58 from L | ine 53 | 3 and enter the result.          | \$ |  |  |
|    |   | Part VI. ADDITIONAL EXPEN   | SE (   | CLAIMS                           |    |  |  |
|    | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.  |   |        |                                  |    |  |  |

#### Part VII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)

Date: March 30, 2011

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Signature: /s/ Charles B Delaine

Charles B Delaine (Debtor)